

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

4.0 Ellista.					
Complete this report in duplicate at the time Send copy to Department of Health and Seni				whenever instrument is re	epaired.
ALCO SENSOR IV SN 097430			[DATE OF INSPECTION 11/13/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 205 N Lexington St Harrisonville MO 64701			5	TIME OF INSPECTION 3:31 am	12 12 1
CHECKLIST: Place a mark in the box by eac		sfactory or if operation	na within establis	hed limits. (Write in observ	ved val-
ues where determined.) Unmarked items mus			•		11 8
DIGITAL READOUT (ALL ELEMENTS O	PERATIONAL)				
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING PROPERLY		27 (20)		8	
TIME AND DATE DISPLAYING PROPER					
BREATH ALCOHOL ACCURACY STANDAR	RDS				
SIMULATOR SOLUTION	SIMULATOR SOLUTION				
STANDARD SUPPLIER Intoximeters	STANDARD SUPPLIER Intoximeters LOT # AG304703 EXP. DATE 02/16/2025				
SIMULATOR TEMPERATURE (34°C ± 0	SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIMULATOR SN SIMULATOR EXP DATE				
Run three tests using a standard solution less. Check the box corresponding to the 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	standard solution being BETWEEN 0.095% and BETWEEN 0.076% and	used. (PRINTOUT A I 0.105% INCLUSIVI I 0.084% INCLUSIVI	ATTACHED) E E	nd must have a spread of	.005 or
ST 1 ▼ 0.080 TEST 2 ▼ 0.080			TEST 3 0.080		
RFI DETECTOR OPERATING			A Addisortion to the top		
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)					
REFUSALS 0 (004) 0	(.0509) 0	(.1014) 0	(.1519)	0 (OVER .19)	0
List any new parts and describe any alteration established limits (use other side if necessary Maintenance test due to the printer need	/).		the instrument to	operate satisfactorily and	d within
INSPECTING OFFICER			to the open and		
SIGNATURE #264	3, 2		R. Stark		
TYPE II PERMIT NUMBER EXPIRATION DATE 230174 08/08/2025	100 Maria		TELEPHONE NUMBER (816) 380-894	0	*
2875 Jan	cohol Program, MO Dep nes Boulevard luff, MO 63901	partment of Health a	nd Senior Service	es, Southeast District Offic	e

AS IV Serial no: 097430 Version no: 532B

TEST RECORD 01066

Temp Date Time 210L Air Blank: 11/13/24 03:31 .000 Calibration Check: 20 11/13/24 03:31 .000

Subject Name

TEST #1

Subject I.D.

STARK #224 Operator Name, I.D.

HPD

Location

AS IV Serial no: 097430 Version no: 5328

TEST RECORD 01068

Temp Date Time 218L

Air Blank:

11/13/24 03:35 .000

Calibration Check:

21 11/13/24 03:35 .080

Subject Name

TesT出

Subject I.D.

STACK \$259

Operator Name, I.D.

HPD

location

AS IV Serial no: 097430 Version no: 532B

TEST RECORD 01067

ÀS	IV	Ser i	al n	0:	097438
Ver	sic	n no	: 5:	37.1	В

location

TEST RECORD 01969

Temp Date Time 210L VOID: RFI

12 11/13/24 03:37

Subject Name

Subject I.D.

STACK #187

Operator Name: I.D.

HPI

location



Airgas USA LLC (LAB) 3500 Bernard Street St. Louis, Mo. 63103. Ph: (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Customer Name Exclusive Supplier Intoximeters, Inc. 2081 Craig Road

St. Louis, Mo 63146

Test Date: 16-Feb-2023

Lot # AG304703 Model 108

Exp Date 16-Feb-2025 Cyl. Type

108

Component

Ethanol Nitrogen

Certified Concentration

0.080 ± 0.002 BrAC (218 ppm)

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.	Concentration	•		RGM Serial No.	Concentration
EB0010581	391.8 ppm		F S	EB0010603	392.5 ppm
EB0010570	259.8 ppm	7089		EB0010559	258.9 ppm
EB0010285 EB0010561	209.0 ppm			EB0010562	104.2 ppm
EB0010581	103.7 ppm 52.22 ppm	*8	2.0	EB0010579	52.94 ppm
	o bbill				

CRM Serial No. Concentration CC727481 800.0 ppm CC727496 253.0 ppm

CRM Serial No. CC727493 CC727498

Concentration 390.0 ppm 150,0 ppm

Analytical Method: **NDIR**

Approved for Release:

Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



I. 1.

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

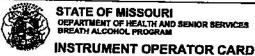
RYAN STARK

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOX EC/IR II

for the determination of the alcoholic content of blood from a eample of expired sie. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE	Mile Mason
NUMBER 230174	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
EXPIRES 8/8/2025	Daves I. McDoles
MO 580-0771 (6-to)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



The named cardholder is authorized to operate an evidential breath alcohol in the name of the determination of the alcoholic content in breath form of expired a in Masouri.

Operator ST/ Permit No 230

STARK, RYAN

Date Issued 8/8/2023 Date Expires 8/8/2025

